

SERIAL NUMBER <div style="text-align: center;">09/293,563</div>	FILING DATE <div style="text-align: center;">04/15/99</div>	CLASS <div style="text-align: center;">370</div>	GROUP ART UNIT <div style="text-align: center;">2731</div>	ATTORNEY DOCKET NO. <div style="text-align: center;">FORE-43</div>
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APPLICANT

RONALD P. BIANCHINI, JR., PA.

  
  

**\*\*CONTINUING DOMESTIC DATA\*\*\*\*\***

VERIFIED

NAO

  

**\*\*371 (NAT'L STAGE) DATA\*\*\*\*\***

VERIFIED

NAO

  
  
  

**\*\*FOREIGN APPLICATIONS\*\*\*\*\***

VERIFIED

NAO

  
  
  

IF REQUIRED, FOREIGN FILING LICENSE GRANTED 05/04/99

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged <u>8</u> <u>Q</u> <div style="display: flex; justify-content: space-between; font-size: small;"> <span>Examiner's Initials</span> <span>Initials</span> </div>	STATE OR COUNTRY <div style="text-align: center;">PA</div>	SHEETS DRAWING <div style="text-align: center;">4</div>	TOTAL CLAIMS <div style="text-align: center;">24</div>	INDEPENDENT CLAIMS <div style="text-align: center;">5</div>
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ADDRESS

ANSEL M. SCHWARTZ  
 ONE STERLING PLAZA  
 201 CRAIG STREET  
 SUITE 304  
 PITTSBURGH PA 15213

  

TITLE

VERY WIDE MEMORY TDM SWITCHING SYSTEM

FILING FEE RECEIVED  <div style="text-align: center;">\$1,118</div>	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT NO. _____ for the following:	<div style="display: flex; flex-direction: column;"> <input type="checkbox"/> All Fees           <input type="checkbox"/> 1.16 Fees (Filing)           <input type="checkbox"/> 1.17 Fees (Processing Ext. of time)           <input type="checkbox"/> 1.18 Fees (Issue)           <input type="checkbox"/> Other _____           <input type="checkbox"/> Credit         </div>
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